

**CONFIDENTIAL**

10 May 1974

MEMORANDUM FOR: D/PRD and DD/PRD

SUBJECT: PRD Post Mortem Phase II Work Program

I am principal action officer on Project 15: Designing the  
Collection Product, due in August. I have contacted OTR [ ]  
where I obtained some ideas and suggestions for further inquiry--  
e.g., a book by [ ] on the general subject of effective  
intelligence writing. [ ] has contributed other bits and pieces  
which [ ] will gather together in next two or three weeks.

25X1

25X1

Distribution:  
Orig - Addressee  
1 - PRD Subject  
1 - PRD Chrono  
1 - WH Chrono

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|---|-------------------------|--------------------------|-----------------------|
| SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM |                         |                          |                       |
| <input type="checkbox"/>                        | UNCLASSIFIED            | <input type="checkbox"/> | CONFIDENTIAL          |
| <input type="checkbox"/>                        |                         | <input type="checkbox"/> | SECRET                |
| <b>OFFICIAL ROUTING SLIP</b>                    |                         |                          |                       |
| <b>TO</b>                                       | <b>NAME AND ADDRESS</b> | <b>DATE</b>              | <b>INITIALS</b>       |
| 1   | DD/PRD                  |                          |                       |
| 2   |                         |                          |                       |
| 3   | D/PRD                   |                          |                       |
| 4   |                         |                          |                       |
| 5   |                         |                          |                       |
| 6   |                         |                          |                       |
| <input type="checkbox"/>                        | <b>ACTION</b>           | <input type="checkbox"/> | <b>DIRECT REPLY</b>   |
| <input type="checkbox"/>                        | <b>APPROVAL</b>         | <input type="checkbox"/> | <b>DISPATCH</b>       |
| <input type="checkbox"/>                        | <b>COMMENT</b>          | <input type="checkbox"/> | <b>FILE</b>           |
| <input type="checkbox"/>                        | <b>CONCURRENCE</b>      | <input type="checkbox"/> | <b>INFORMATION</b>    |
| <input type="checkbox"/>                        |                         | <input type="checkbox"/> | <b>PREPARE REPLY</b>  |
| <input type="checkbox"/>                        |                         | <input type="checkbox"/> | <b>RECOMMENDATION</b> |
| <input type="checkbox"/>                        |                         | <input type="checkbox"/> | <b>RETURN</b>         |
| <input type="checkbox"/>                        |                         | <input type="checkbox"/> | <b>SIGNATURE</b>      |
| <b>Remarks:</b>                                 |                         |                          |                       |
|   |                         |                          |                       |
| <b>FOLD HERE TO RETURN TO SENDER</b>            |                         |                          |                       |
| <b>FROM: NAME, ADDRESS AND PHONE NO.</b>        |                         |                          | <b>DATE</b>           |
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